

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	3		15 03 07
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	H-S	866	06 06 07
RESPONSE FORMALITY REVIEW	SK	809	21/4/01

INDEX OF CLAIMS

✓	.....	Rejected	N	.....	Non-elected
=	.....	Allowed	I	.....	Interference
—	(Through numeral)...	Canceled	A	.....	Appeal
÷	.....	Restricted	O	.....	Objected

Claim	Final Original	Date
1	1	05/05/02
2	2	11/21/02
3	3	= 11/21/02
4	4	28/01/03
5	5	= 08/08/03
6	6	
7	7	
8	8	
9	9	
10	10	
11	11	
12	12	
13	13	
14	14	
15	15	
16	16	
17	17	
18	18	
19	19	
20	20	
21	21	
22	22	
23	23	
24	24	
25	25	
26	26	✓ =
27	27	
28	28	
29	29	
30	30	
31	31	
32	32	
33	33	
34	34	
35	35	✓ = = =
36		
37		
38		
39		
40		
41		
42		
43		
44		
45		

Claim	Date
Final	Original
51	
52	
53	
54	
55	
56	
57	
58	
59	
60	
61	
62	
63	
64	
65	
66	
67	
68	
69	
70	
71	
72	
73	
74	
75	
76	
77	
78	
79	
80	
81	
82	
83	
84	
85	
86	
87	
88	
89	
90	
91	
92	
93	
94	
95	

Claim	Date
Final	Original
101	
102	
103	
104	
105	
106	
107	
108	
109	
110	
111	
112	
113	
114	
115	
116	
117	
118	
119	
120	
1-3	
121	
122	
1-4	
1-6	
126	
1-7	
1-8	
1-9	
130	
131	
132	
133	
134	
135	
136	
137	
138	
139	
140	
141	
142	
143	
144	
145	

BFC Form 2928 - 2724-2725 Copy